Report run on:

March 27, 2007 - 4:27 PM

NYR000043521 IPARK LAKE SUCCESS LLC EPA Region 02 Extract Flag: Y Facility Identifier: County: NASSAU Basic Notes: EXTRACT_FLAG UPDATED OCT 2003 VIA SQL Universes U Active: Transporter: Generator: LQG El Indicator (HE / GW): N / N IC In Place: N Operating TSDF: Receive Date: 28 MAR 2006 **Activity Location: NY** Source Type: Notification Seq. Number: 2 Other/Previous Site Name: IPARK LAKE SUCCESS LLC 1111 MARCUS AVE Mailing 1111 MARCUS AVE Location Address: **LAKE SUCCESS, NY 11042-1034 LAKE SUCCESS, NY 11042-1034** Address: UNITED STATES **Contact Person** GEORGE MULLEN 1111 MARCUS AVE LAKE SUCCESS, NY 11042-1034 (516) 616-9500 For Source **UNITED STATES** Information Private Owner (current) Type: **IPARK LAKE SUCCESS LLC** Phone: From: 03/10/2000 To: Private Owner (current) 68801 ROCKLEDGE DR Type: LOCKHEED MARTIN CORP BETHESDA, MD 20817 Phone: (301) 897-6000 From: 01/01/0001 To: Type: Private Operator (current) IPARK LAKE SUCCESS LLC Phone: From: 03/10/2000 Horizontal Collection Method: Reference Point Code: Geometric Type Code: Source Map Scale Numbers: 0 Horizontal Reference Datum: Horizontal Accuracy Measure: Commercial Availability: Unknown Tsd Date: Non Notifier: No Land Type: Private State District: NYSDEC R1 Accessibility: No. Employees: 0 NAICS Codes: 621498 All Other Outpatient Care Centers Notes: LOCATION ADDRESS FOUND IN THE US POST OFFICE INTERNET SEARCH Regulated Waste Activities Hazardous Waste Generator Status - Federal: Large Quantity Generator; State: NY-9 Not Yet Determined Transfer Facility: **Used Oil Activities** Off-Specification Used Oil Burner: Unknown **Used Oil Transporter Activity** Other Hazardous Waste Generator Activities Transporter: Unknown No Importer Activity: **Used Oil Fuel Marketer Activity** Transfer Facility: Unknown Mixed Waste Generator: No Marketer who directs shipment Used Oil Processor and/or off-specification used oil to Transporter Activity: Unknown off-specification used oil burner: Re-refiner Activity Unknown TSD Activity: No Recycler Activity: Unknown Processor: Unknown Marketer who first claims the used Refiner: oil meets the specifications: Unknown Unknown Exempt Boiler and/or Industrial Furnace Small Quantity Onsite Burner Exemption: Unknown Destination Facility for Underground Smelting, melting, Refining Furnace Universal Waste: Unknown Injection Control: Unknown Exemption: Unknown Description of Hazardous Wastes (as reported on Site Identification Form) **EPA Waste Codes: D008** Receive Date: 22 MAY 2002 Report Cycle: 2001 Source Type: Biennial Report Seq. Number: 3 **Activity Location: NY** Other/Previous Site Name: LOCKHEED MARTIN CORPORATION Mailing 88 DURYEA RD 1111 MARCUS AVE Location MELVILLE, NY 11747 LAKE SUCCESS, NY 11042 Address: Address: UNITED STATES

Contact Person For Source

Information

NICHOLAS VALKENBURG (631) 391-5234

UNITED STATES

Carrie Smith/R2/USEPA/US

To pazman4@aol.com

03/27/2007 04:26 PM

СС

bcc

Subject 8700-12

Per our phone call this afternoon. After the 8700-12 has been completed and signed send it to the following address:

US EPA REGION 2
Division of Environmental Planning & Protection
RCRA Programs Branch
ATTENTION; Notification Forms
290 Broadway, 22 Floor
New York, New York 10007-1866

After you complete the revised 8700-12 please fax it to my attention at (212) 637-3056 we will process it based on the fax but drop the original in the mail so we will have a record of the revised 8700-12 with your original signature. You can send it by regular mail. Also take note the you printed the incorrect EPA Number at the bottom of page 2. It should be NYR 000 043 521. Thanks

If you have additional questions my direct phone number is (212) 637_4112.







Date: Wednesday, March 28, 2007

To: USEPA Region 2

Carrie Smith

Phone: 212-637-4112 Fax: 212-637-3056

From: Fiber Control, Inc.

Jack Paz

Phone: 516-781-3000 Fax: 516-781-3085

Pages: 5

Subject: IPark Lake Success



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

04/06/2012

Region 2

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER:

NYR000043521

INSTALLATION NAME: LOCKHEED MARTIN CORP

INSTALLATION ADDRESS:

1111 MARCUS AVE

LAKE SUCCESS, NY 11042

MAILING ADDRESS:

1111 MARCUS AVE LAKE SUCCESS, NY 11042

EPA Form 8700-12AB (4-80)

USEPA - REGION 2 RCRA Programs Branch 290 Broadway, 22nd Floor New York, NY 10007-1866

ATTN: RCRA NOTIFICATIONS

Tel: (212) 637-4106 Fax: (212) 637-4437

TO: LOCKHEED MARTIN CORP

or Current Occupant

ATTN: ROBERT PHILLIPS

2950 N HOLLYWOOD WAY, SUITE 125

BURBANK, CA 91505

AGENCY REGION I

卫	FC Th Sta	ND DMPLETED DRM TO: e Appropriate ate or Regional fice.	United States Environmental Protection Agency RCRA SUBTITLE C SITE IDENTIFICATION FORM PROGRAMS BRANCH
	1.	Reason for Submittal	Reason for Submittal: To provide an Initial Notification (first time submitting site identification information / to obtain an EPA ID number for this location)
12. (B)		MARK ALL BOX(ES) THAT APPLY	To provide a Subsequent Notification (to update site identification information for this location) As a component of a First RCRA Hazardous Waste Part A Permit Application As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #) As a component of the Hazardous Waste Report (If marked, see sub-bullet below) Site was a TSD facility and/or generator of ≥1,000 kg of hazardous waste, >1 kg of acute hazardous waste, or >100 kg of acute hazardous waste spill cleanup in one or more months of the report year (or State equivalent LQG regulations)
3/2/12	2.	Site EPA ID Number	EPA ID Number 1NY DI 07517961013171 NYR0000 43 521
1	3.	Site Name	Name: Lockheed Martin Corporation
the	4.	Site Location Information	Street Address:
ð	5.	Site Land Type	Private County District Federal Tribal Municipal State Other
عمس	6.	NAICS Code(s) for the Site	A. [5]6[2]9[1] C. [1]
2/8		(at least 5-digit codes)	B D
	7.	Site Mailing Address	Street or P.O. Box: Same as above
ta a			City, Town, or Village:
, }	ρ	Site Contact	State: Country: Zip Code: First Name: Robert MI: S Last: Phillips
L.	٥.	Person	First Name: Robert MI: S Last: Phillips Title: Project Lead - Lockheed Martin Corporation
_3			Street or P.O. Box: 2950 N. Hollywood Way Suite 125
Z			City, Town or Village: Burbank
			State: CA Country: USA Zip Code: 91505
7			Email: robert. S. phillips @ Inc. com
P	_	1 1 0	Phone: (817) 495-0251 Ext.: Fax: A. Name of Site's Legal Owner: A 11 1 1 5 C Date Became 0210 15
S	9.		A. Name of site's Legal Owner: Apollo Lake Success Properties Owner: 03/20/2000
Ø			Owner Type: Private County District Federal Tribal Municipal State Other Street or P.O. Box: Marcus Avenue
9			City, Town, or Village: Lare Success Phone: 516-616-9500
P			State: N\ Country: USA Zip Code: \\0\42
Votproce			B. Name of Site's Operator: Lockheed Martin Corporation Operator: 04/22/1996
_			Operator Type: Private County District Federal Tribal Municipal State Other
Recons	EP/	A Form 8700-12 12/12/ 12/7/11 late R	48700-13 A/B, 8700-23 (Revised 11/2009) led 12/12/11. Thornation Page of 4 application should be ruce (D)

10. Type of Mark "Y	0. Type of Regulated Waste Activity (at your site) Mark "Yes" or "No" for all <u>current</u> activities (as of the date submitting the form); complete any additional boxes as instructed.										
A. Hazardo	us Wa	ste Activitie	es; Complete all parts 1-7.								
YND			f Hazardous Waste rk only one of the following –	a, b, or c.	Υ□N	X	Transporter of Hazardous Waste If "Yes", mark all that apply.				
	□ a.	LQG:	Generates, in any calendar mo (2,200 lbs./mo.) or more of haz Generates, in any calendar mo accumulates at any time, more lbs./mo) of acute hazardous wa Generates, in any calendar mo accumulates at any time, more (220 lbs./mo) of acute hazardou material.	ardous waste; or nth, or than 1 kg/mo (2.2 iste; or nth, or than 100 kg/mo			 a. Transporter b. Transfer Facility (at your site) Treater, Storer, or Disposer of Hazardous Waste Note: A hazardous waste permit is required for these activities. Recycler of Hazardous Waste 				
	□ b.	SQG:	100 to 1,000 kg/mo (220 – 2,20 acute hazardous waste.	0 lbs./mo) of non-							
	_		Less than 100 kg/mo (220 lbs./mo) of non-acute hazardous waste.			Ø	5. Exempt Boiler and/or Industrial Furnace If "Yes", mark all that apply. a. Small Quantity On-site Burner				
Y 🖾 N 🗖		Short-Terr	ve, indicate other generator ac m Generator (generate from a sk t and not from on-going process n explanation in the Comments s			■ Exemption ■ b. Smelting, Melting, and Refining Furnace Exemption					
Y 🗆 N 🍱	e.		ates Importer of Hazardous Waste			W.	6. Underground Injection Control				
Y 🗆 N 🔯	f.	Mixed Wa	ste (hazardous and radioactive)	Generator	Υ□N		7. Receives Hazardous Waste from Off-site				
B. Universa	ıl Wası	e Activities	; Complete all parts 1-2.		C. Use	d Oil	Activities; Complete all parts 1-4.				
Y 🗖 N	3 1.	accumula regulation	antity Handler of Universal Wa te 5,000kg or more) [refer to y ns to determine what is regula iniversal waste managed at yo hat apply.	our State ted]. Indicate	Y 🗆 N		1. Used Oil Transporter If "Yes", mark all that apply. a. Transporter b. Transfer Facility (at your site)				
		d. Lamps e. Other (s			Υ□N	; ☑:	2. Used Oil Processor and/or Re-refiner If "Yes", mark all that apply. a. Processor b. Re-refiner 3. Off-Specification Used Oil Burner 4. Used Oil Fuel Marketer If "Yes", mark all that apply.				
Y [] N [2 .		on Facility for Universal Waste azardous waste permit may be				 a. Marketer Who Directs Shipment of Off-Specification Used Oil to Off-Specification Used Oil Burner b. Marketer Who First Claims the Used Oil Meets the Specifications 				

D. Eligible Aca wastes purs	 Eligible Academic Entities with Laboratories—Notification for opting into or withdrawing from managing laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K 												
❖ You m 262 S	You <u>must</u> check with your State to determine if you are eligible to manage laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K												
	ZOZ GUSPARITA NA												
1. Opting in	1. Opting into or currently operating under 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories												
	See the item-by-item instructions for definitions of types of eligible academic entities. Mark all that apply: a. College or University												
	 □ b. Teaching Hospital that is owned by or has a formal written affiliation agreement with a college or university □ c. Non-profit Institute that is owned by or has a formal written affiliation agreement with a college or university 												
2. Withdrawing from 40 CFR Part 262 Subpart K for the management of hazardous wastes in laboratories													
11. Description	of Hazardous Waste)											
A. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.													
0008													
	,												
The control of the co													
B. Waste Code: hazardous w spaces are n	s for State-Regulate astes handled at your eeded.	d (i.e., non-Federal) site. List them in the	Hazardous Wastes e order they are pres	. Please list the wast ented in the regulatio	e codes of the State- ns. Use an additiona	Regulated Il page if more							
NONE													
				Service Co.									
3.1 AMERICAN	-												

	A CONTRACTOR OF THE PARTY OF TH	
12. Notification of Hazardous Secondary Materia	I (HSM) Activity	
Y N Are you notifying under 40 CFR 260.4: secondary material under 40 CFR 261	2 that you will begin managing, are managing .2(a)(2)(ii), 40 CFR 261.4(a)(23), (24), or (25	g, or will stop managing hazardous)?
If "Yes", you <u>must</u> fill out the Addendur Material.	m to the Site Identification Form: Notification	for Managing Hazardous Secondary
13. Comments		
Became an episodic	SQG in 2011, based o	N ONE month's
generation of a Doog	8 waste	
Returned to CESGG & 2011. Projected general expected to change gen	tatus once waste was	shipped off-site in
2011. Projected genera	tion from construction	activities is not
expected to change ger	recetor status from	ESQG.
	The Action	
14. Certification. I certify under penalty of law that if accordance with a system designed to assure the on my inquiry of the person or persons who many information submitted is, to the best of my knowledge penalties for submitting false information, including Hazardous Waste Part A Permit Application, all of the certification.	at qualified personnel properly gather and ev age the system, or those persons directly res edge and belief, true, accurate, and complete ng the possibility of fines and imprisonment for	raluate the information submitted. Based sponsible for gathering the information, the e. I am aware that there are significant or knowing violations. For the RCRA
Signature of legal owner, operator, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)
Weht White	Robert S. Phillips Lead	12-7-11



Last Updated By: NUS

Update a Site Identification Form



Last Updated On: 05/01/2006

IPARK LAKE SUCCESS LLC

LAKE SUCCESS

NYR000043521

Navigational Shortcuts: General Information Reason Site ID and Name Location Land Type NAICS Mailing Contact Owner and Operator Waste Activity Lat/Long Haz. Wastes Certification

General	Information							
Receive	ed Date:*	03/28/2006	Non-notifier:	Select				
Number	r of Employees:	0	Extract to Public?	Send Ac	knowledgement:			
Accessi	bility:	Select						
			18.1.1.1		S D NAME OF THE PARTY OF THE PA			
. Reaso	n for Submittal [*]							
	To provide initial notification (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities). [Source N]							
V	To provide su	ubsequent not	ification (to update	site identificati	on information). [Source N]			
	As a compon	ent of a First l	RCRA Hazardous V	Vaste Part A P	Permit Application. [Source A]			
	As a compon	ent of a Revis	sed RCRA Hazardo	us Waste Part	A Permit Application. [Source A]			
L	As a compon	ent of the Haz	zardous Waste Rep	ort. [Source R				
	Implementer	- Agency that	is implementer of F	Record for Han	dler. [Source I]			
	Emergency.	[Source E]						
	Temporary. [Source T]			.51			
		1						
. Site ID)			T	e Constant Paris or and Station Of			
EPA ID:	* NYR00	0043521	Activity Location:*	NY	shappe 11 septem			
. Site Na	ame		Section A	North PRE	THE CONTRACT OF MACO			
Name:*		IPARK LAKE	E SUCCESS LLC					
	Ÿ	VIT			nembb 4 festinati nist			
. Site Lo	ocation (Physical ac	Idress, not P.O. Box	or Route)		Copy from: Select			
Number: 1111								
Street 1	. *	MARCUS AVE			No.			
Street 2	::		1.1					
City:*		LAKE SUCCE	ss s	ate:*				
				La la la combina				

	- Han	idici > Opda	ate a Site Ideliti	ilcation Pon	П					Page 1	of of
Zip Code	: *		110421034		c	Count	ty: *		NASSAU		
State Dis	trict:	rict: NYSDEC R1						_			
5. Site Lan	d Typ	e *									
Site Land	Туре) :	Private								
C North A		1 4	. 01'5'1'	0 1 0							
	Select		/ Classification	n System (N	IAICS)	Hint			100		
Choose NAICS:	Select										
<u> </u>	VAICS	A NAICS	B NAICS C N	AICS D							
ala .	62149 (Prima		NAICS B:				NAICS C:			NAICS D:	
<u></u>	, 111116	ai y)							1		
7. Site Mai	ling A	ddress							Copy from: S	Select	٠
Number:	1111				-			-			
Street 1:	MAF	RCUS AVE									
*			T (March) 4-15								
Street 2:											1
City: *	LAK	E SUCCESS		State: *	NEW YORK						,
Zip Code: *	1104	21034		Country:	UNITED STATES						
8. Site Con	tact F	Person Sam	e as Permit Contact								
First Nam	e: *	GEORGE		Middle Initial:			Last Name	e: *	MULLEN		
Phone Number: ³	k	516616950	tension:	2-1-1-1 · 1		Email Address:		N 100 - 1 14 1			
8a. Site Co	ntact	Address							2 fra S	alast	utia'
Number:	_								Copy from: S	elect	
	1111		·								_
Street 1:	IVIAR	CUS AVE									
Street 2:	1 410	- 01100505		Ct-t-	Ment	V65:					
City:	LAKI	SUCCESS		State:	NEW.	YORK		22	***		_
Zip Code:	1104	21034		Country:	UNITED STATES						

al Ov	vner aı	nd Operator * Hint	reals si		. agri s
gal C	wner	Add Delete All Owners			
Ind.	Туре	Name	Address	Date Became Current	Date Ended Current
со	Р	LOCKHEED MARTIN CORP	68801 ROCKLEDGE DR BETHESDA MD 20817	01/01/0001	4
со	Р	IPARK LAKE SUCCESS LLC	US	03/10/2000	
gal C	perato	Or Add Delete All Operators	estel hik		
Ind.	Туре	Name	Address	Date Became Current	Date Ended Current
СР	Р	IPARK LAKE SUCCESS LLC US		03/10/2000	sla MaJ e
	Ind.	Ind. Type CO P CO P gal Operate Ind. Type	Ind. Type Name CO P LOCKHEED MARTIN CORP CO P IPARK LAKE SUCCESS LLC gal Operator Add Delete All Operators Ind. Type Name CP P IPARK LAKE SUCCESS	Ind. Type Name Address CO P LOCKHEED MARTIN CORP BETHESDA MD 20817 CO P IPARK LAKE SUCCESS LLC gal Operator Add Delete All Operators Ind. Type Name Address CP P IPARK LAKE SUCCESS	Ind. Type Name Address Date Became Current CO P LOCKHEED MARTIN CORP BETHESDA MD 20817 CO P IPARK LAKE SUCCESS LLC US Gal Operator Add Delete All Operators Ind. Type Name Address Date Became Current CP P IPARK LAKE SUCCESS LLC US O3/10/2000

For items 2 through 6, check all that apply.
Unknown 2. Transporter of Hazardous Waste
3. Treater, Storer, or Disposer of Hazardous Waste
Unknown 4. Recycler of Hazardous Waste
5. Exempt Boiler and / or Industrial Furnace
Unknown a. Small Quantity On-site Burner Exemption
Unknown b. Smelting, Melting, Refining Furnace, Exemption
Unknown 6. Underground Injection Control
C. Used Oil Activities
1. Used Oil Transporter - Indicate types of
Unknown a. Transporter
Unknown b. Transfer Facility

Lamps Pesticides				2. Used Oil Prod Indicate types o	cessor of activi	and / or Reties.	e-refiner -
				The second second	rocess		
Waste	Destination Facil	ity for Unive	rsal	Unknown b. F	Re-refine	er	
	· ·			Unknown 3. C	Off-Spe	cification l	Jsed Oil Burner
				4. Used Oil Fuel activities.			
				Unknown a. N Off-Specification Oil Burner	Marketer Used C	Who Direction Who Direction	cts Shipment of pecification Used
	-			Unknown b. M Oil Meets the Sp	/larketer	Who First	Claims the Used
D. State Activitie	s			*			
F	·	No State	Activ	vities Available.			
		A STATE CONTRACTOR OF THE SECOND			A combined to the second		
10a. Latitude and	Longitude			F			
Latitude:	0	L	ongit	tude:			
Geometric Type Code:	Select	×1 .					
Reference Point Code:	Select						
Source Map Scale Numbers:	0	H	Horizo	ontal Accuracy Mea	asure:	ĺ	
Horizontal Collection Method:	Select				N. S. S.	-13	
Horizontal Reference Datum:	Select						
					,		
11. Description of	Hazardous Waste	<u>Hint</u>				Dropd	own Size: 10
Type D Select All / Remove All	Type F Select All / Remove All	Type K Select All / Rem		Type P Select All / Remove All	Ty Select All	ype U / Remove All	Type X Select All / Remove
÷.							

- D001 🔨	F001 🔨	K001	LABP 🔨	U001 🔥	B001
D002	F002	K002	P001	U002	B002
D003	F003	K003	P002	U003	B003
D004	F004	K004	P003	U004	B004
D005	F005	K005	P004	U005	B005
D006	F006	K006	P005	U006	B006
D007	F007	K007	P006	U007	B007
D008	F008	K008	P007	U008	
D009	F009	K009	P008	U009	
D010 😭	F010 😭	K010 💜	P009 💜	U010 💜	
Total D Selected: 1	Total F Selected: 0	Total K Selected: 0	Total P Selected: 0	Total U Selected: 0	Total X Selected: 0

12. Comments Clear Notes

Chars Remaining

LOCATION ADDRESS FOUND IN THE US POST OFFICE INTERNET SEARCH

13. Certification * Add Dele	ete All Certifiers		Hint R	ead the certification.
First Name:	M.I.:	Last Name:	Title:	Date Signed:
NICHOLAS		VALKENBURG	AGENT OF L M	05/22/2002
RICHARD		MARCEL	FACILITY CONSTRUCTION MGR	03/27/2006

Navigational Shortcuts: General Information Reason Site ID and Name Location Land Type NAICS Mailing Contact Owner and Operator Waste Activity Lat/Long Haz. Wastes Certification

Update Delete Cancel

URL: /rcrainfo/handler/siteidmntn.jsp



Update a Site Identification Form



IPARK LAKE SUCCESS LLC

LAKE SUCCESS

NYR000043521

Navigational Shortcuts: <u>General Information Reason</u> <u>Site ID and Name Location Land Type NAICS</u> <u>Mailing Contact Owner and Operator Waste Activity Lat/Long Haz. Wastes</u> <u>Certification</u>

General I	nformation 🚤	IPark	reed a se	parte	4	
Receive	d Date:*	03/28/2007	Non-notifier:	STADIO C	Select	
Number	cknowledgement:					
Accessil	bility:	Select			GENA	N DESIGN ASSEMBLE
						Harrier Burger Gers
I. Reasoı	n for Submittal ³	k				
			on (to obtain an EF s). [Source N]	PA ID N	umber f	for hazardous waste, universal
V	To provide s	ubsequent no	tification (to updat	e site id	dentifica	tion information). [Source N]
10	As a compor	ent of a First	RCRA Hazardous	Waste	Part A	Permit Application. [Source A]
ļĢ	As a compor	ent of a Revi	sed RCRA Hazard	lous W	aste Par	rt A Permit Application. [Source A]
	As a compor	ent of the Ha	zardous Waste Re	eport. [Source F	R] [F
	Implementer	- Agency tha	t is implementer of	f Recor	d for Ha	ndler. [Source I]
	Emergency.	[Source E]			evell.	
	Temporary. [Source T]				1814 (1871) 1914 (1871)
0.0:4- ID						
2. Site ID				,		en Otrasta ser nografitori util est
EPA ID:	* NYR00	0043521	Activity Location:* NY		America.	DEPOSE * sensitivat
3. Site Na	ame					
Name:*		IPARK LAK	Æ SUCCESS LLC			
		MU.				azechbă teginoù sil-
4. Site Lo	ocation (Physical a	ddress, not P.O. Box	or Route)			Copy from: Select
Number: 1111						
Street 1:	.*	MARCUS AV	E			
Street 2:			** \	-	9.11	1 - ine ine
City:*		LAKE SUCCE	ESS	State:*		NEW YORK
Oity.			s. v 18 gt/1	State:		1501546

RCRAINIO	> Har	idier > Opda	te a Site Identii	ication Form	n				Page	2 Jf.
Zip Code	: *		110421034		Cou	nty:*		NASSAU	180	
State Dis	trict:		NYSDEC R1							
).						
5. Site Lar	nd Typ	ре *			,					
Site Land	Туре	e:	Private							
6 North A	morio	an Industry	Classification	System (A	IAICC)			3		
Г	Select		Classification	- System (N	IAICS) H	int				
NAICS:		.*								
NAIGO	NAICS		NAICS C N	AICS D						_
-3-	62149 (Prima		NAICS B:			NAICS C:	i	1	NAICS D:	
LL										
7. Site Mai	ling A	ddress						Copy from:	Select	28
Number:	111	1111								
Street 1:	MAF	MARCUS AVE								
Street 2:				- u-1	v (
City: *	LAK	E SUCCESS		State: *	NEW YO	RK				
Zip Code: *	110421034			Country:	UNITED STATES			2		
8. Site Con	tact l	Person Same	as Permit Contact							
8. Site Contact Person Same as Permit Contact First Name: * GEORGE			Middle Initial:		Last Nam	e: *	MULLEN			
Phone			tension: 4	519	Email Address:					
8a. Site Co	ntact	Address						Copy from:	Select	175
Number:	1111									
Street 1:	MAF	MARCUS AVE								
Street 2:										
City:	LAK	E SUCCESS		State:	NEW YO	RK				
Zip Code:	1104	21034		Country:	UNITED STATES					

A. Le	gal C	Owner	Add Delete All Owners		La treaty server of ser	entre introduci	2,040	
Seq.	100	Туре	Name	nicalia.	Address	Date Became Current	Date Ended Curren	
1	со	OP Cadi	LOCKHEED MARTIN CORP		01 ROCKLEDGE DR THESDA MD 20817	01/01/0001		
3	со	Р	IPARK LLC	US		03/10/2000		
B. Le	gal C	perat	OF Add Delete All Operators			andrid	State Ac	
Seq.	Ind.	Туре	Name	7) Se 6 - 1 - 1	Address	Date Became Current	Date Ended Current	
2	СР	Р	IPARK LLC	US		03/10/2000		
Indic	ate	ntity Ge	nerator generator activities (chec	k all that		Shalast I	zardous	
appl		, 10113	generator activities (effect	, K all tilat	Waste	Disposer of Ha	Zaruous	
			tates Importer of Hazardou		4. Recycler of Hazardous Waste 5. Exempt Boiler and / or Industrial Furnace			
	e. Mix erator		aste (hazardous and radio	active)				
Generator of Hazardous Waste (State) * 9 - Not Yet Determined					 a. Small Quantity On-site Burner Exemption b. Smelting, Melting, Refining Furnace, Exemption 6. Underground Injection Control 			
				i qil				
B. Universal Waste Activities			ste Activities	C. Used Oil Activities	16.1	3,000		
1. La	rge (Quanti	ty Handler of Universal V	10/10	1. Used Oil Transporter - activities.	Indicate types	of	
Batte	eries		Generated Acc	umulated	a. Transporter	21	Janon	
		ats			b. Transfer Facility	75.8. 1 B. 20.1	144.3	
Lam	Thermostats			2. Used Oil Processor and / or Re-refiner -				

	1 age 31
Pesticides	Indicate types of activities.
2. Destination Facility for Universal Waste	a. Processor
,	b. Re-refiner
	3. Off-Specification Used Oil Burner
	4. Used Oil Fuel Marketer - Indicate types of activities.
	 a. Marketer Who Directs Shipment of Off- Specification Used Oil to Off-Specification Used Oil Burner
	 b. Marketer Who First Claims the Used Oil Meets the Specifications
D. State Activities	
No State Activ	rities Available.
10a. Latitude and Longitude	

10a. Latitude and I	10a. Latitude and Longitude						
Latitude:	0	Longitude:	0				
Geometric Type Code:	Select			D			
Reference Point Code:	Select			A control of			
Source Map Scale Numbers:	0	Horizontal Accuracy Measure:					
Horizontal Collection Method:	Select						
Horizontal Reference Datum:	Select		,				

Type D Select All / Remove All	Type F Select All / Remove All	Type K Select All / Remove All	Type P Select All / Remove All	Type U Select All / Remove All	Type X Select All / Remove
D001 D002 D003 D004 D005 D006 D007 D008 D009 D010	F001 F002 F003 F004 F005 F006 F007 F008 F009 F010	K001 K002 K003 K004 K005 K006 K007 K008 K009	LABP	U001 U002 U003 U004 U005 U006 U007 U008 U009	B001 B002 B003 B004 B005 B006 B007

Total D Selected: 1 Total F Selected: 0 Total K Selected: 0 Total P Selected: 0 Total U Selected: 0 Total X Selected: 0

12. Comments Clear Notes

Chars Remaining

THE EPA NYR000043521 ASSIGNED TO THIS ADDRESS WAS LISTED UNDER LOCKHEED MARTIN. WOULD LIKE TO TRANSFER GENERATOR NAME TO IPARK, LAKE SUCCESS, WHO ARE THE CURRENT TENANTS AND NEW GENERATOR.

13. Certification * Add Dele	te All Certifiers			Hint Read the certification.
First Name:	M.I.:	Last Name:	Title:	Date Signed:
GEORGE		MULLEN	VICE PRES OPS	03/26/2007

Navigational Shortcuts: General Information Reason Site ID and Name Location Land Type NAICS Mailing Contact Owner and Operator Waste Activity Lat/Long Haz. Wastes Certification

Update Delete Cancel

URL: /rcrainfo/handler/siteidmntn.jsp

FEDX

AGENCY, REGION II

ND

OMB# 2050-0024; Expires 11/30/2011

FO The Sta	ND MPLETED RM TO: e Appropriate te or Regional ice.	United States Environmental Protection Agency A PROGRAMS RCRA SUBTITLE C SITE IDENTIFICATION FORM RANCH
1. E	Reason for Submittal MARK ALL BOX(ES) THAT APPLY	Reason for Submittal: ☐ To provide an Initial Notification (first time submitting site identification information / to obtain an EPA ID number for this location) ☐ To provide a Subsequent Notification (to update site identification information for this location) ☐ As a component of a First RCRA Hazardous Waste Part A Permit Application ☐ As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #) ☐ As a component of the Hazardous Waste Report (If marked, see sub-bullet below) ☐ Site was a TSD facility and/or generator of ≥1,000 kg of hazardous waste, >1 kg of acute hazardous waste, or >100 kg of acute hazardous waste spill cleanup in one or more months of the report year (or State equivalent LQG regulations)
2.	Site EPA ID Number	EPA ID Number NY D 0 7 5 7 9 6 0 3 7 NY R 0000 43 521
3.	Site Name	Name: Lockhead Martin Corporation
4.	Site Location	Street Address: III Marcus Avenue
	Information	City, Town, or Village: Lake Success County: Nassau
		State: NY Country: USA Zip Code: 11042
5.	Site Land Type	Private County District Federal Tribal Municipal State Other
6.	NAICS Code(s) for the Site	A. [5629] C. []
	(at least 5-digit codes)	B.
7.	Site Mailing	Street or P.O. Box: Same as above
	Address	City, Town, or Village:
		State: Country: Zip Code:
8.	Site Contact Person	First Name: Robert MI: S Last: Phillips
	reison	Title: Project Lead - Lockheed Martin Corporation
		Street or P.O. Box: 2950 N. Hollywood Way Suite 125
		City, Town or Village: Burbank
		State: CA Country: USA Zip Code: 91505
		Email: robert.5. phillips@lmc. Com Phone: (817) 495-0251 Ext: Fax:
^	Lanel Owner	
9.	Legal Owner and Operator	A. Name of site's Legal Owner: Apollo Lake Success Vrape-tles LLC Owner: 03/20/2000
	of the Site	Owner Type: Private County District Federal Tribal Municipal State Other
		Street or P.O. Box: 1111 Marcus Avenue City, Town, or Village: Lake Success Phone: 516-616-9500
		Data Passama
		B. Name of Site's Operator: Lockheed Martin Corporation Operator: 04/22/1996 Operator Type: Private County District Federal Tribal Municipal State Other

Oil Meets the Specifications

. Eligible Academic Entities with Laboratories—Notification for opting into or withdrawing from managing laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K								
	You <u>must</u> check with your State to determine if you are eligible to manage laboratory hazardous wastes pursuant to 40 CFR Part 262 Subpart K							
N/	al/A							
1. Opting	7 nto or currently operati	ng under 40 CFR Par	t 262 Subpart K for ti	he management of ha	azardous wastes in la	boratories		
See the	item-by-item instruc	tions for definitions	of types of eligible	academic entities.	Mark all that apply:	Jordionos		
□a. C	ollege or University							
□ь. т	eaching Hospital that is	owned by or has a fo	ormal written affiliatio	n agreement with a c	ollege or university			
□c. N	on-profit Institute that is	s owned by or has a f	ormal written affiliatio	on agreement with a c	college or university			
2. Withdra	wing from 40 CFR Part	262 Subpart K for th	e management of ha	zardous wastes in lat	ooratories			
11. Descriptio	n of Hazardous Waste)						
	es for Federally Regulist them in the order the needed.							
D008								
						10.00		
	-							

B. Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-Regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed.								
Nove								
241 - 141 -								
				V. M. J. Z. W				
W. VVI TABLE								

Y N Are you notifying under 40 CFR 260.42 that you will begin managing, are managing, or will stop managing hazardous secondary material under 40 CFR 261.2(a)(2)(ii), 40 CFR 261.4(a)(23), (24), or (25)? If "Yes", you must fill out the Addendum to the Site Identification Form: Notification for Managing Hazardous Secondary Material. 13. Comments Short term generator of lead abatement waste that is a part of an onegoing process, construction activities generating this waste anticipated to be considered by Mid -2012. Generating this waste anticipated to be considered by Mid -2012. 14. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquity of the person or persons who manage the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, frue, accurate, and complete. I naming violations. For the RCRA
13. Comments Short term generator of lead abatement waste that is not part of an angoing pricess, Construction activities generating this waste articipated to be completed by Mid-2012. Generating this waste articipated to be completed by Mid-2012. 14. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, there are significant
Short term generator of lead abatement waste that is not part of an on-going process. Constructour activities generating this waste anticipated to be completed by Mid-2012. Generating this waste anticipated to be completed by Mid-2012. 14. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best or my knowledge and belief, frue, accurate, and complete. I lam aware that there are significant
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accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant
Hazardous Waste Part A Permit Application, all owner(s) and operator(s) must sign (see 40 CFR 270.10(b) and 270.11).
Signature of legal owner, operator, or an authorized representative Name and Official Title (type or print) Date Signed (mm/dd/yyyy)
Robert S. Phillips, Project Lead 9/19/11



AGENCY, REGION II

2011 DEC -9 PM 1: 43

RCRA PROGRAMS BRANCH ARCADIS of New York, Inc. Two Huntington Quadrangle Suite 1S10 Melville New York 11747 Tel 631 249 7600 Fax 631 249 7610

www.arcadis-us.com

USEPA
Region 2 DEPP-RPB
290 Broadway, 22nd Floor
New York, New York 1007-1866
Attn: RCRA Notifications, Ms. Louisa Marquez

Subject:

Lockheed Martin Corporation, NYD075796037
1111 Marcus Avenue, Lake Success, NY 11042

NYR0000 43 521

BU

ENVIRONMENT

Dear Ms. Marquez:

On behalf of Lockheed Martin Corporation (Lockheed Martin), ARCADIS is resubmitting the attached RCRA Subtitle C Site Identification Forms (8700-12). Both forms were returned by your office requiring further information before they can be processed. The attached forms are signed originals.

The first form was originally submitted in September 2011 to provide notification of a change in generator status from a Conditionally Exempt Small Quantity Generator (CESQG) to a Small Quantity Generator (SQG). The second form was originally submitted in November 2011 to provide notification of a change in generator status from SQG back to CESQG.

As described on the forms, these changes in status were necessary given the short-term (episodic) generation of D008 hazardous waste from construction activities at the above-referenced facility during one month in 2011 (May). Projected generation from continued short-term construction activities to be completed in mid-2012 is not expected to change generator status from CESQG moving forward.

Sincerely,

ARCADIS of New York, Inc.

Art Zahradnik

Associate Project Manager

Attachments

Copies:

Robert S. Phillips, Lockheed Martin Nicholas Valkenburg, ARCADIS Scott Morris, ARCADIS Laura Curtis, ARCADIS

Imagine the result

10000

Date:

December 8, 2011

Contact:

Art Zahradnik

Phone:

631.391.5208

Email:

Art.Zahradnik@arcadisus.com

Our ref:

B0038161.0001.00102

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2012 MAR -2 PM 4: 39

RCRA PROGRAMS BRANCH

USEPA
Region 2 DEPP-RPB
290 Broadway, 22nd Floor
New York, New York 10007-1866
Attn: RCRA Notifications, Ms. Betsy Lopez

Two Huntington Quadrangle Suite 1S10 Melville New York 11747 Tel 631 249 7600 Fax 631 249 7610 www.arcadis-us.com

ARCADIS of New York, Inc.

ENVIRONMENT

Subject:

Lockheed Martin Corporation, NYR 000043521
1111 Marcus Avenue, Lake Success, NY 11042 & NYD075796037

Dear Ms. Lopez:

On behalf of Lockheed Martin Corporation (Lockheed Martin), ARCADIS is providing an explanation of two active EPA ID numbers for the same physical site and submitting a Form 8700-12 for each EPA ID number to correct the issue and eliminate future potential confusion while taking the opportunity to update status given current operations at the site by Lockheed Martin. Enclosed is a form to update EPA ID# NYR 000043521 with its generator status updated to CESQG and a form for EPA ID# NYD075796037 the one that changes it to inactive. This is a follow up response to your conversation with Ms. Laura Curtis of ARCADIS on February 28, 2012, following inquiries in January 2012 from your office to Mr. Robert S. Phillips, Project Lead, Lockheed Martin Corporation. The January 2012 inquiries related to Form 8700-12 fillings by Lockheed Martin in 2011 (under EPA ID# NYD075796037) and the correct site address (1111 Marcus Avenue, Lake Success, NY).

From a record search into US EPA's Envirofacts, and Enforcement Compliance & History Online (ECHO) Databases, as well as looking at past hazardous waste biennial reports in the defunct Biennial Reporting System (BRS), it appears that a second EPA ID number was applied for environmental remediation activities while the first number is associated with former manufacturing, which ceased in 1997. The following are a set of findings from these documents:

 EPA ID # NYR 000043521 has handler listed as Lockheed Martin Corporation located at 1111 Marcus Ave., Lake Success, NY 11042 as a large quantity generator (LQG). [Envirofacts, ECHO] Date:

February 28, 2012

Contact:

Nicholas Valkenburg

Phone:

631.391.5234

Email:

Nick.valkenburg@arcadisus.com

Our ref:

B0038161.00001.00102

ARCADIS

Ms. Betsy Lopez
February 28, 2012

- EPA ID # NYD075796037 has handler listed as Lockheed Martin Federal Systems, located at 365 Lakeville Rd., Great Neck, NY 11020 and as a conditionally exempt small quantity generator (CESQG). [Envirofacts, ECHO]
- The last Biennial Report found filed by EPA ID # NYD075796037 was for CY 1999 for Lockheed Martin Federal Systems at 365 Lakeville Rd., Great Neck, NY and listed various hazardous wastes noted as process related. A waste source type code A93 (Closure of management unit(s) or equipment Other Processes) indicates facility cleaning out processes after ceasing to operate.
- A Biennial Report found filed by EPA ID# NYR 000043521 for CY 1999 has Lockheed Martin Corporation ES&H located at 365 Lakeville Rd., Great Neck, NY listed as handler and a large quantity generator of 294.5 tons of spent carbon from a groundwater treatment system.
- A Biennial Report found filed by EPA ID# NYR 000043521 for CY 2001 has
 Lockheed Martin Corporation located at 1111 Marcus Ave., Lake Success,
 NY 11042 generating 8 tons of solids from a tank used in a soil vapor
 extraction (groundwater) treatment unit. Report notes a change of address
 from 365 Lakeville Rd. in the facility comments. Note this is the last biennial
 report found for EPA ID# NYR 000043521 through 2007. [BRS database]
- A Biennial Report found filed by EPA ID# NYR 000122648 for CY 2003 has
 Antech Diagnostics located at 1111 Marcus Ave., Lake Success, NY 11042.
 Antech Diagnostics is listed as the operator and i.Park Lake Success LLC
 (i.Park) as the owner as of March 2000. Lockheed Martin sold the property
 to i.Park who then was granted a change of address for the property from
 365 Lakeville Rd. Great Neck, NY 11020 to 1111 Marcus Ave, Lake
 Success, NY 11042.
- The property was developed by i.Park into a multi-use structure. There are
 three different operators listed as being located at 1111 Marcus Ave., Lake
 Success, NY 11042: Lockheed Martin (EPA ID# NYR000043521), Antech
 Diagnostics (EPA ID# NYR000122546), and i.Park Lake Success (as EPA ID
 # NYR000147264).[Envirofacts]

ARCADIS

Ms. Betsy Lopez February 28, 2012

Per your conversation with Ms. Curtis, activity is noted to occur under EPA ID# NYR 000043524 to the present. This filing of forms will not only correct the status of the facility, but will be used to correct a September 2011 waste manifest, and in other communications at the State level.

Sincerely,

ARCADIS of New York, Inc.

Nicholas Valkenburg Vice President

Attachments

Copies:

Robert S. Phillips, Lockheed Martin Mary Morningstar, Lockheed Martin Art Zahradnik, ARCADIS Scott Morris, ARCADIS Laura Curtis, ARCADIS 2012 MAR -2 PM 4: 39
RCRA PROGRAMS

3/16/12 Ethel

OM	IB# 2050-0024;	Expires <u>12/31/2014</u>		76.4	AVIRONMENTAL PROT	ECTION		
FO The	MPLETED RM TO: e Appropriate te or Regional	United States RCRA SUBTITI	Environm	ental Protection A	2012 MAR - 2 PM L	30		
1.	Reason for Submittal	Reason for Submittal: ☐ To provide an Initial Notification for this location)	(first time sub	omitting site identificatio	on information / to obtain	n an EPA ID number		
E	MARK ALL BOX(ES) THAT APPLY	■ To provide a Subsequent Notific□ As a component of a First RCR/□ As a component of a Revised R	A Hazardous \ CRA Hazardo	Waste Part A Permit Ap ous Waste Part A Permi	oplication it Application (Amendm	•		
		☐ As a component of the Hazardo ☐ Site was a TSD facility and/ >100 kg of acute hazardous LQG regulations)	or generator o	of ≥1,000 kg of hazardo	ous waste, >1 kg of acu	te hazardous waste, or ar (or State equivalent		
2.	Site EPA ID Number	EPA ID Number NYR000	0 0 4	3 5 2 1				
3.	Site Name	Name: Lockheed Martin Corporation						
4.	Site Location Information	Street Address: 1111 Marcus Ave.						
	imormation	City, Town, or Village: Lake Success			County: Nassau			
		State: NY	Country: US	SA	Zip Code: 1104	2		
5.	Site Land Type	✓ Private	ict Fed	leralTribal	Municipal S	state Other		
6.	NAICS Code(s) for the Site	A. [5 6 2 9 1		С				
	(at least 5-digit codes)	В.		D				
7.	Site Mailing	Street or P.O. Box: 1111 Marcus Ave.						
	Address	City, Town, or Village: Lake Success						
		State: NY	Country: US	SA	Zip Code: 11042	2		
8.	Site Contact	First Name: Robert	MI: S.	Last: Phillips	4	i i		
	Person	tle: Project Lead - Lockheed Martin Corporation						
		Street or P.O. Box: 2950 N. Hollywood	l Way Suite	125				
		City, Town or Village: Burbank	2004 - 317 (A.C.)					
		State: CA	Country: US	SA	Zip Code: 9150	5		
		Email: robert.s.phillips@Imco.com			5.05			
		Phone: 817-495-0251	Ex	t.:	Fax:			
9.	Legal Owner and Operator	A. Name of Site's Legal Owner: iPark	Lake Succes	ss LLC - see Sec. 13	Date Became 03	3/20/2000		
		Owner Type: Private County		Federal Trib	al Municipal	State Other		
		Street or P.O. Box: 1111 Marcus Aver	nue			Anna Anna Anna Anna Anna Anna Anna Anna		
		City, Town, or Village: Lake Success		112 20011110	Phone: 516-616	9500		
		State: NY	Country: US	SA	Zip Code: 11042	2		
		B. Name of Site's Operator: Lockheed	Martin Corp	ooration	Date Became Operator:	1/22/1996		
		Operator Type: ✓ Private ☐ County	District	Federal Trib	al Municipal	State Other		

EPA ID Number N Y R 0 0 0 0 4 3 5 2 1

 Type of Regulated Waste Activity Mark "Yes" or "No" for all <u>currel</u> 		e form); complete any additional boxes as instructed.
A. Hazardous Waste Activities; Con	plete all parts 1-10.	
Y ✓ N 1. Generator of Hazar If "Yes", mark only	dous Waste one of the following – a, b, or c.	Y N ✓ 5. Transporter of Hazardous Waste If "Yes", mark all that apply.
(2,200 Genera accum Ibs./mo Genera accum	ates, in any calendar month, 1,000 kg/mo lbs./mo.) or more of hazardous waste; or ates, in any calendar month, or ulates at any time, more than 1 kg/mo (2.2 o) of acute hazardous waste; or ates, in any calendar month, or ulates at any time, more than 100 kg/mo s./mo) of acute hazardous spill cleanup al.	Y N ✓ 6. Treater, Storer, or Disposer of Hazardous Waste Note: A hazardous waste Part B permit is required for these activities.
	1,000 kg/mo (220 – 2,200 lbs./mo) of non- nazardous waste.	Y N ✓ 7. Recycler of Hazardous Waste
	an 100 kg/mo (220 lbs./mo) of non-acute ous waste. enerator activities in 2-4.	Y N 8. Exempt Boiler and/or Industrial Furnace If "Yes", mark all that apply. a. Small Quantity On-site Burner Exemption
	r (generate from a short-term or one-time going processes). If "Yes", provide an ments section.	b. Smelting, Melting, and Refining Furnace Exemption
Y N ✓ 3. United States Import	er of Hazardous Waste	Y N ✓ 9. Underground Injection Control
Y N ✓ 4. Mixed Waste (hazard	ous and radioactive) Generator	Y N 10. Receives Hazardous Waste from Off-
accumulate 5,00 regulations to de	landler of Universal Waste (you 0 kg or more) [refer to your State etermine what is regulated]. Indicate al waste managed at your site. If "Yes"	C. Used Oil Activities; Complete all parts 1-4. Y N 1. Used Oil Transporter If "Yes", mark all that apply a. Transporter b. Transfer Facility (at your site)
f. Other (specify) g. Other (specify) Y N ✓ 2. Destination Faci		Y N 2. Used Oil Processor and/or Re-refiner If "Yes", mark all that apply. □ a. Processor □ b. Re-refiner Y N 3. Off-Specification Used Oil Burner Y N 4. Used Oil Fuel Marketer If "Yes", mark all that apply. □ a. Marketer Who Directs Shipment of Off-Specification Used Oil Burner □ b. Marketer Who First Claims the Used Oil Meets the Specifications

EP	A ID Number	N Y R 0	0 0 0 0 4 3	5 2 1	OMB#	#: 2050-0024; Exp	ires 12/31/2014		
D.	wastes pursu	ant to 40 CFR Part	Laboratories—Notifi 262 Subpart K	cation for opting in	to or withdrawing ti	rom managing iaboi	atory nazardous		
	You car	ONLY Opt into Sub	part K if:						
	agree	are at least one of th ement with a college lege or university; Al	e following: a college or university; or a no ND	or university; a teac n-profit research inst	hing hospital that is c itute that is owned by	owned by or has a for y or has a formal affili	mal affiliation ation agreement with		
	 you h 	nave checked with ye	our State to determine	e if 40 CFR Part 262	Subpart K is effective	e in your state			
Υ[s	ee the item-by-item	y operating under 40 instructions for def	CFR Part 262 Subpa initions of types of	rt K for the managemeligible academic e	nent of hazardous wa ntities. Mark all tha	stes in laboratories t apply:		
		. College or Univers	···· ···						
			that is owned by or h				•		
	c.	. Non-profit institute	that is owned by or h	ias a formai written a	πiliation agreement v	vith a college or unive	ersity		
Υ[N	ithdrawing from 40 (CFR Part 262 Subpar	t K for the manageme	ent of hazardous was	stes in laboratories			
11.	Description o	f Hazardous Waste)						
۹.	. Waste Codes for Federally Regulated Hazardous Wastes. Please list the waste codes of the Federal hazardous wastes handled at your site. List them in the order they are presented in the regulations (e.g., D001, D003, F007, U112). Use an additional page if more spaces are needed.								
	D008					R	天 智		
						BRIPA	2		
						NOG.	3 000		
						7	# = E		
		and the state of t		***		Ü	0 0		
					4	-	P.		
3.	 Waste Codes for State-Regulated (i.e., non-Federal) Hazardous Wastes. Please list the waste codes of the State-Regulated hazardous wastes handled at your site. List them in the order they are presented in the regulations. Use an additional page if more spaces are needed. 								
	none								
_									

12. Notification of Hazardous Secondary Material (HSM) Activity							
Y N Are you notifying under 40 CFR 260.42 that you will begin managing, are managing, or will stop managing hazardous secondary material under 40 CFR 261.2(a)(2)(ii), 40 CFR 261.4(a)(23), (24), or (25)?							
If "Yes", you <u>must</u> fill out the Addendum to the Site Identification Form: Notification for Managing Hazardous Secondary Material.							
13. Comments							
Notification submitted for EPA ID #NYR00004	3521 to change generator status from larg	e quantity generator to conditionally					
exempt small generator, consistent with curre	nt operations and to recognize any record	s under EPA ID # NYD075796037 is					
documented under EPA ID #NYR000043521.	See attached letter to US EPA - Region	2 explaining how two EPA ID numbers					
exist for the same physical site, but this site de	oes not have the same address. A subse	quent notification has been submitted					
concurrently to inactivate EPA ID # NYD07579	6037.						
9A - i.Park Lake Success LLC owner, and its s	uccessors (Apollo Lake Success Properti	es, LLC and 1111 Marcus Avenue					
Unit 2 Owners, LLC).							
10.A.2 - Current one-time lead paint abatemen	t activites in 1Q2012 may cause generate	or to be a small quantity generator for					
one month, but will then return to a conditional	ly exempt small generator status (CESQG	s), as these activities are not part of					
an ongoing process.							
		20					
CR. 2 HA							
BR PR - 2							
AC TO THE TOTAL PROPERTY OF THE PROPERTY OF TH							
14. Certification. I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations. For the RCRA Hazardous Waste Part A Permit Application, all owner(s) and operator(s) must sign (see 40 CFR 270.10(b) and 270.11).							
Signature of legal owner, operator, or an authorized representative	Name and Official Title (type or print)	Date Signed (mm/dd/yyyy)					
The Stallfing	Robert S. Phillips, Project Lead	02/29/2012					
,							



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

04/14/2006

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER: NYR000043521

INSTALLATION NAME: | IPARK LAKE SUCCESS LLC

INSTALLATION ADDRESS: 1111 MARCUS AVE

LAKE SUCCESS, NY 11042-1034

MAILING ADDRESS:

1111 MARCUS AVE

LAKE SUCCESS, NY 11042-1034

EPA Form 8700-12AB (4-80)

USEPA - REGION 2 RCRA Programs Branch 290 Broadway, 22nd Floor New York, NY 10007-1866

ATTN: RCRA NOTIFICATIONS

Tel: (212) 637-4106 Fax: (212) 637-3056

TO: IPARK LAKE SUCCESS LLC

or Current Occupant

ATTN: GEORGE MULLEN

1111 MARCUS AVE

LAKE SUCCESS, NY 11042-1034

SEND COMPLETED FORM TO: The Appropriate State or	United States Environmental Protection Agency							
EPA Regional Office.	RCRA SUBTITLE C SITE IDENTIFI	ICAT	TION FORM					
Reason for Submittal (See instructions on page 13.)	Reason for Submittal: To provide Initial Notification of Regulated Waste Activity (to obtain an EPA ID Number for hazardous waste, universal waste, or used oil activities)							
MARK ALL BOX(ES) THAT APPLY	□ To provide Subsequent Notification of Regulated Waste Activity (to update site identification information) □ As a component of a First RCRA Hazardous Waste Part A Permit Application □ As a component of a Revised RCRA Hazardous Waste Part A Permit Application (Amendment #)							
2. Site EPA ID Number (page 14)	EPA ID Number UYRIOODIDIAJIS							
3. Site Name (page 14)	Name: IPARK LAKE SUCCESS	- 25						
4. Site Location Information	Street Address: 1111 MARCUS AVE.							
(page 14)	City, Town, or Village: LAKE SUCCESS		State: NY					
	County Name: NASSAU		Zip Code: 11042 -1034					
5. Site Land Type (page 14)	Site Land Type: Private □ County □ District □ Federal □ Indian □ Municipal □ State □ Other							
6. North American Industry Classification	A. B.							
System (NAICS) Code(s) for the Site (page 14)	C. D. I.							
7. Site Mailing	Street or P. O. Box: 1111 MARCUS AVE							
Address (page 15)	City, Town, or Village: LAKE SUCCESS							
	State: NEW YORK		V					
	Country: USA		Zip Code: 11042					
8. Site Contact Person	First Name: GEORGE MI:		Last Name: MULLEN					
(page 15)	Phone Number: 516-616-9500 Extension:		Email address:					
9. Operator and Legal Owner of the Site (pages 15 and 16)	A. Name of Site's Operator: IPARK LAKE SUCCESS LLC Operator Type: A Private County District Fe	ederal	Date Became Operator (mm/dd/yyyy): 3 0 2000 Indian Municipal State Other					
	B. Name of Site's Legal Owner: IPARK LAKE SUCCESS LLC Output Type: Markets D. County D. Dietrict D. F.	odora!	Date Became Owner (mm/dd/yyyy):					
	Owner Type: Private County District Fe	euerai	□ Indian □ Municipal □ State □ Other					

EPA ID NO: 🔔 🖳					OMB#: 2050-0028 Expires 1/31/200			
9. Legal Owner	Street or P. O. Box:	111	1 MARCUS AVE		II Material Name of the			
(Continued) Address	City, Town, or Village:		E SUCCESS		2005 MAR 28 PM 5: 03			
Addiess	State:	NY			DOO DOO			
	Country: USA				Zip Code: 11042			
10. Type of Regulated Mark "Yes" or "No	-	te any	additional boxes a	as instructe	ed. (See instructions on pages 17 to 20.)			
A. Hazardous Was Complete all pa	te Activities rts for 1 through 6.							
Y № N 🗖 1. Generator o				YONO	2. Transporter of Hazardous Waste			
If "Yes", ch	oose only one of the follo	wing -	a, b, or c.	VDND	3. Treater, Storer, or Disposer of			
a. LQG: Greater than 1,000 kg/mo (2,200 lbs./mo.)				TUNU	Hazardous Waste (at your site) Note:			
of non-acute hazardous waste; or					A hazardous waste permit is required for			
	100 to 1,000 kg/mo (220 -				this activity.			
a b. 500.	of non-acute hazardous wa		- · · · · · · · · · · · · · · · · · · ·	VDND	4. Recycler of Hazardous Waste (at your			
			*	1 4 11 4	site)			
C. CESC	G: Less than 100 kg/mo (2 of non-acute hazardous		/mo.)					
	or non-acute nazardous	waste		Y □ N □ 5. Exempt Boiler and/or Industrial				
In addition, ir	ndicate other generator ac	tivities	·.		Furnace If "Yes", mark each that applies.			
Y ☑ N ☑ d. United States Importer of Hazardous Waste				☐ a. Small Quantity On-site Burner Exemption				
Y ☐ N ☐ e. Mixed Waste (hazardous and radioactive) Generator			e) Generator	□ b. Smelting, Melting, and Refining Furnace Exemption				
*	-		ς.	YONO	6. Underground Injection Control			
B. Universal Waste Activities				C. Used Oil Activities Mark all boxes that apply.				
	tity Handler of Universal V more) [refer to your State			Y □ N □ 1. Used Oil Transporter				
_	hat is regulated]. Indicate				If "Yes", mark each that applies.			
	rated and/or accumulated	at you	r site. If "Yes",		□ a. Transporter□ b. Transfer Facility			
mark all box	es that apply: Gene	rate	Accumulate		D. Hansier Facility			
				YONO	2. Used Oil Processor and/or Re-refiner			
a. Batteries				-	If "Yes", mark each that applies.			
b. Pesticides					☐ a. Processor☐ b. Re-refiner			
c. Thermostat	S							
d. Lamps			0	YONO:	3. Off-Specification Used Oil Burner			
e. Other (spec	ify)		, 🗅	YONO	4. Used Oil Fuel Marketer			
f. Other (spec	ify)	0	-		If "Yes", mark each that applies. ☐ a. Marketer Who Directs Shipment of			
g. Other (spec	ify)	0	0		Off-Specification Used Oil to Off-Specification Used Oil Burner □ b. Marketer Who First Claims the			
Y 🗆 N 🗓 2. Destination	Facility for Universal Was	te			Used Oil Meets the Specifications			
MI-A A L			for this set it.		k.			

PA ID NO: _				OMB#: 2050-0028 Expires 1/31/2006		
11. Description of Hazardous Was	stes (See instructio	ons on page 21.)	· asyv			
A. Waste Codes for Federally Fede	n in the order they ar				·	
D008				BRANCH		
B. Waste Codes for State-Regu	lated (i.e., non-Fed	eral) Hazardous W	astes. Please list th	e waste codes of the	State-regulated	
hazardous wastes handled at y more spaces are needed for w		n the order they are	presented in the rec	gulations. Use an add	litional page if	
·						
12. Comments (See instructions o	n page 21.)				*	
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		-				
	8					
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	The state of the s	Mary Control of the C		Maria de la companio		
		<u> </u>				
13. Certification. I certify under pen in accordance with a system designed on my inquiry of the person or persons information submitted is, to the best of penalties for submitting false information the RCRA Hazardous Waste Part See instructions on page 21.)	I to assure that quali s who manage the s f my knowledge and ion, including the pos	fied personnel propo ystem, or those pers belief, true, accurat ssibility of fine and in	erly gather and evalue ons directly respons e, and complete. I a opprisonment for kno	uate the information so sible for gathering the m aware that there are wing violations.	ubmitted. Based information, the e significant	
signature of operator, owner, or an uthorized representative	Name and Office	cial Title (type or p	rint)		Date Signed (mm/dd/yyyy)	
11-Mand	RICHARD	MARCEL	FACILITY/	OPSTRUCTIO	- 3/27/0	
		Name of the second seco	IVLVONA	OEIL		
· Andrew Allendary						

RCRARep Handler Detail Report

Report run on: March 29, 2006 9:58 AM

Facility Information

Name/ID, Location / Activity Location, GPRA

Dist Notified SNC Regulated Activity

LOCKHEED MARTIN CORPORATION

1 OK LG ----

NYR000043521 1111 MARCUS AVE, LAKE SUCCESS NY

Extract Flag

All data for this Handler is released to the Public (except any enforcement-sensitive CME data)
Activity Location

Handler Module Data for NY State only

Other Site Name

01/01/01 99 Biennial LOCKHEED MARTIN CORP ES&H

02/26/98 97 Biennial LOCKHEED MARTIN CORP

Location Address

05/22/02 01 Biennial 1111 MARCUS AVE

NASSAU (NY059)

LAKE SUCCESS, NY 11042 State District: NYSDEC R1

Land Type: X (X)

01/01/01 99 Biennial 365 LAKEVILLE RD

NASSAU (NY059)

GREAT NECK, NY 110201696 State District: NYSDEC R1

Land Type: U (U)

02/26/98 97 Biennial UNION TURNPIKE & LAKEVILLE RD

NASSAU (NY059)

NORTH HEMPSTEAD, NY 110400000

State District: NYSDEC R1

Land Type: U (U)

08/12/97 Notification UNION TNPK & LAKEVILLE RD

NASSAU (NY059)

NORTH HEMPSTEAD, NY 11040 State District: NYSDEC R1 Land Type: Private (P)

North American Industrial Classification (NAICS)

05/22/02 01 Biennial 56291

56291 Remediation Services

Mailing Address

05/22/02 01 Biennial 88 DURYEA RD

MELVILLE, NY 11747

01/01/01 99 Biennial 100 S CHARLES ST STE 1400

BALTIMORE, MD 212011696

02/26/98 97 Biennial 2550 N HOLLYWOOD WAY 3RD FLOOR

BURBANK, CA 915050000

08/12/97 Notification 2550 N HOLLYWOOD WAY SUITE 301

BURBANK, CA 91505

Contact

RCRARep Handler Detail Report NYR000043521

March 29, 2006 9:58 AM Report run on:

(Private)

Contact

05/22/02 01 Biennial NICHOLAS VALKENBURG

Phone: (631)391-5234

01/01/01 99 Biennial GENE MATSUSHITA

Phone: (410)468-1038

02/26/98 97 Biennial ROBERT C GILBERT

Phone: (818)847-0210

08/12/97 Notification DAVID JENSEN

2550 N HOLLYWOOD WAY SUITE 301

BURBANK, CA 91505 Phone: (818)847-0792

Legal Owner/Operator of Site

08/12/97 Notification Current Owner from -D&B#:

LOCKHEED MARTIN CORP

68801 ROCKLEDGE DR BETHESDA, MD 20817 Phone: (301)897-6000

Regulated Hazardous Waste Activities

05/22/02 01 Biennial

Federal Large Quantity Generator

01/01/01 99 Biennial

Federal Large Quantity Generator

02/26/98 97 Biennial

Federal Large Quantity Generator

08/12/97 Notification

Federal Large Quantity Generator

Waste Codes

D000

08/12/97 Notification	D000	D001	D002	D003	D004	D005	D007	D008
	D009	D011	D019	D022	F001	F002	F003	F005
	P012	P098	U028	U069	U080	U112	U135	U159
	U213	X001	X003					

D001 IGNITABLE WASTE D002 CORROSIVE WASTE REACTIVE WASTE D003 ARSENIC D004 D005 BARIUM D007 CHROMIUM D008 LEAD D009 MERCURY D011 SILVER D019

DESCRIPTION

CARBON TETRACHLORIDE

D022 CHLOROFORM

THE FOLLOWING SPENT HALOGENATED SOLVENTS USED IN DEGREASING: TETRACHLOROETH F001 YLENE, TRICHLORETHYLENE, METHYLENE CHLORIDE, 1,1,1-TRICHLOROETHANE, CARBON



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

08/18/97

This is to acknowledge that you have filed a Notification of Hasardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA LD. NUMBER ->

NYR000043521

FACILITY NAME -> LOCKHEED MARTIN CORP

MAILING ADDRESS -> 2550 N HOLLYWOOD WAY SUITE 301 BURBANK, CA 91505

INSTALLATION ADDRESS ->

UNION TNPK & LAKEVILLE RD NORTH HEMPSTEAD, NY 11040

EPA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY **REGION II** 290 BROADWAY **NEW YORK, NEW YORK 10007-1866**

ATTN: AIR & WASTE MANAGEMENT DIVISION, 22ND FL. **HAZARDOUS & SOLID WASTE PROGRAMS BRANCH RCRA NOTIFICATIONS**

TO: JENSEN, DAVID MGR GROUNDWATER LOCKHEED MARTIN CORP 2550 N HOLLYWOOD WAY SUITE 301 BURBANK, CA 91505



composing this form. The statement of th

of the Resource Conservation and Recovery Act).		United S	Suries E	חסיוניה	mental	Prote	action Ac	Sency	active.				10	. 476		
I. Installation's EPA ID Num							1,					•			و ملما	*
X A First Notification		sequent piele itei				F	NI	RIG	Instal	0	PA .	10 H	15	12	1	7 :
II. Name of Installation (Incl				_			-	711) ()				100	-		
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VII. Ownership (See instructi		N. S. FO	લ્લું.		Eco		7.5			43!						
A. Name of installation's Leg		1 -1			10			 []		·	T.		1		T	
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THE RESIDENCE OF THE PARTY OF T	tivity (Mark 'X' in the appropriate boxes	B. Used Oil Fuel Activities
1. Generator (See instructions) 2. Greater than 1000kg/mo (2.20 b. 100 to 1000 kg/mo (220 - 2.2 c. Less than 100 kg/mo (220 lbs 2. Transporter (Indicate Mode in both a. For own waste only) 3. For commercial purposes Mode of Transportation 1. Air 2. Rail 3. Highway 4. Water 5. Other - specify	3. Treater, Storer, Dispose installation) Note: A perifor the activity; see institution of the acti	1. Off-Specification Used Cit Fuel ructions. 2. Generator Marketing to Burner 5. Other Marketier 5. Other Marketier 6. Burner - indicate devicers: - Type of Combustion Cavace 1. Utility Baller 2. Industrial Baller 2. Industrial Furnace 3. Industrial Furnace 1. Utility Baller 2. Industrial Furnace 2. Industrial Furnace 3. Industrial Furnace 2. Specification Used Cit Fuel Marketing Cairms the Cit Meets the Specification 3. Industrial Furnace 3. Industrial Furn
	5. Underground Injection (
### Wastes your installation handles (Se 1. Ionitable 2 Comosive 3 Reactive (D001; (D002) (D003) X	4. Toxicity Characteristic (D000) X D 0 0 3 CFR 261 31 - 33 See instructions if you need 3	5
C. Other Westes. (State or other westes 1 2 X 8 5 0 X 9 0 C Certification	requiring a handler to have an I.D. number. 3 X 7 2 6 X 9 1	See instructions.) 5
submitted. Based on my inquiry of to gathering the information, the info complete. I am aware that there are imprisonment for knowing violation	ed to assure that qualified personne he person or persons who manage the ormation aubmitted is, to the best of significant pensities for out militar fel	re prepared under my direction or supervision in all properly gather and evaluate the information system, or those persons directly responsible for my knowledge and belief, true, accurate, and se information, including the possibility of fine and
gnature	Name and Official Title (type or pi Allen Krischker, ES	
1. Comments	经营制 经基础 医性炎性炎	tin die Sieder de la Constitution de la constitutio
Yote Mall completed form to the appro	priste EPA Regional or State Office. (See	Section III of the bookiet for addresses.)

· Usted Hazardou	us Wastes. (See 40 CFR	261.31 - 33. Use this	De De	only if you ne	of box						-	_
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August 8, 1997

U.S.E.P.A. Region II 250 Broadway 22nd Floor New York, NY 10007-1866

Subject: Request for New Site EPA ID Number

Mr. Jack Hoyt:

Enclosed is a copy of EPA Form 6700-12. Request that your office assign an EPA ID number for the regulated waste activity at the newly designated Lockheed Martin Corporation site located on the northeast corner at the intersection of Union Turnpike and Lakeville Road in the Town of North Hempstead, New York 11040. When a specific mailing address has been obtained for this site it will be forwarded to your office.

Should you require any additional information, please contact the undersigned at 516-574-2386.

Very truly,

Al Krischker

LMFS Principal Program

Representative/Operations

AK/ek

Enclosure

cc:

R. Gilbert

D. Jensen

RCRA Notifications, USEPA Region II, Air & Waste Management Division

compliand the form. required by tem (Section 8010 of the Resource Conservation United States Environmental Protection Act and Recovery ACIL 5- 120h 3- 454 I. Installation's EPA ID Number (Mark X in the appropriate box) C. Ingrategor's EPA ID Museu B. Subsequent Notification A First Nouncetion (complete Item C) ... 11. Name of installation (include company and specific sits name) RIPIOIR CIOI K HIE I EID I IMIAIRIT III. Location of Installation (Physical address not P.O. Box or Route Number) Street N 110 N Street (continued) 0 A ZIP Code State City or Town MIP E RIT H NIOI County Code County Name NIAISISIAI UI IV. Installation Mailing Address (See Instructions) 516)574-2386 Street or P.O. Box 3 0 11 UII HOLL 2 5 5 0 Ni State ZIP Code ... City or Town 51 -11510 CA BI U R | B A | N V. Installation Contact (Person to be contacted regarding waste activities at ane) (first) Name (1851) SE DIA I J E N Phone Number (area code and number) Job Title 9 MIGIRI 16 | R | O | UNIDIW VI. Installation Contact Address (See Instructions) A. Contact Address Location Mailing 8. Street or P.O. Box Location 310 010 H X 5 ZIP Code State City or Town 5 URBAL VII. Ownership (See instructions) A. Name of Installation's Legal Owner R C 0 R 0 M KHE A ol C E Street, P.O. Box, or Route Number V E GE KIL ED R 0 8 0 City or Town ZIP Code State 2 0 8 MID SID BIE TH (Date Changed) Year D. Change of Owner C. Owner Type B. Land Type Cay Month Indicator Phone Number (area code and number) Yes X No 1 - | 8 | 9 | 7 | - | 6 | 0 P p

Continue on reverse

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•	ID - for Official Use Only
VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes	Refer to Instructions.)
A. Hazardous Waste Activity	B. Used Oil Fuel Activities
1. Generator (See instructions) 2. Greater than 1000kg/mo (220 = 2,200 bbs.) 3. Treater, Stoner, Disposer installation Note A perm for the activity; see instructions of the a	The specification Used Cil Fuel Actors.
IX. Description of Regulated Wastes (Use additional sheets if necessary)	
A. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes corresponded wastes your installation handles. (See 40 CFR Parts 261.20 - 261.24) 1. Ionitable 2 Corrosive 3 Reactive Characteristic (D001; (D002) (D003) (D000). X	Author(a) to see Toxicity of executivative conference conference ()
X 8 5 0 X 9 0 0 X 7 2 6 X 9 1	0 X 1 6 5 X 7 2 5
I certify under penalty of law that this document and all attachments were accordance with a system designed to assure that qualified personnel submitted. Based on my inquiry of the person or persons who manage the significant penalties for submitting false imprisonment for knowing violations.	properly gather and evaluate the information ystem, or those persons directly responsible for
Name and Official Trile (type or print) Allen Krischker, ESH	
d. Comments	
Note Mail completed form to the	

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August 8, 1997

U.S.E.P.A. Region II 250 Broadway 22nd Floor New York, NY 10007-1866

Subject: Request for New Site EPA ID Number

Mr. Jack Hoyt:

Enclosed is a copy of EPA Form 6700-12. Request that your office assign an EPA ID number for the regulated waste activity at the newly designated Lockheed Martin Corporation site located on the northeast corner at the intersection of Union Turnpike and Lakeville Road in the Town of North Hempstead, New York 11040. When a specific mailing address has been obtained for this site it will be forwarded to your office.

Should you require any additional information, please contact the undersigned at 516-574-2386.

Very truly,

Al Krischker
LMFS Principal Program

Representative/Operations

AK/ek

Enclosure

CC:

R. Gilbert

D. Jensen

RCRA Notifications, USEPA Region II, Air & Waste Management Division



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY REGION 2 290 BROADWAY NEW YORK, NY 10007-1866

October 9, 2007

IPARK Lake Success
Att: George Mullen
1111 Marcus Ave
Lake Success, NY 11042-1034

Dear Mr. Mullen:

A new Resource Conservation & Recovery Act Identification (RCRA ID) number = **NYR000147264** has been issued to the 1111 Marcus Ave, Lake Success, NY location for IPARK. The older existing RCRA ID number, *NYR000043521*, for this location was originally issued to Lockheed Martin Corp, and continues to be used by that company for remediation at the site.

Therefore please use the **NYR000147264** RCRA ID number on any manifests of hazardous waste material for your site. You may call me at 212-637-3194 with any questions regarding this issue.

Sincerely,

Betsy Lopez

Environmental Protection Specialist

Division of Environmental Planning and Protection-RCRA Programs Branch

Cc: Roland Ivers, NYSDEC, DSHM, Hazardous Waste Manifests Section

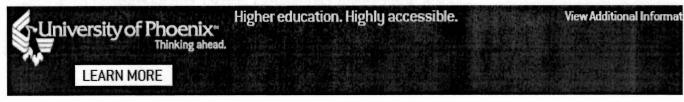
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Sign In New User? Sign Up NYR0000 43521

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★ Map for: 365 Lakeville Rd Great Neck, NY 11020, United States Sav

Driving Directions: To Here - From Here

🖶 Printable Version 🖂 Email Map 📾 Link

Check out our latest maps technology with satellite photos, drag & drop maps, and more...

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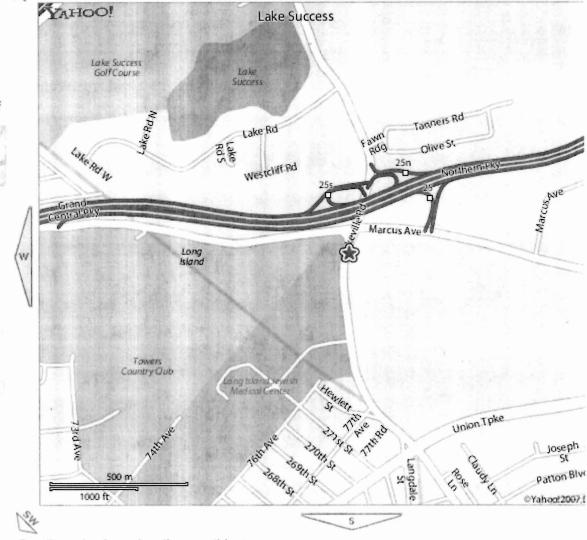
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- Recreation & Entertainment
- Community Services
- Shopping & Services
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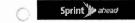
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See these business locations on this map





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★ Map for: 1111 Marcus Ave Lake Success, NY 11042, United States

Driving Directions: To Here - From Here

🖶 Printable Version 🖂 Email Map 📾 Link

Check out our latest maps technology with satellite photos, drag & drop maps, and more...

Get in there!

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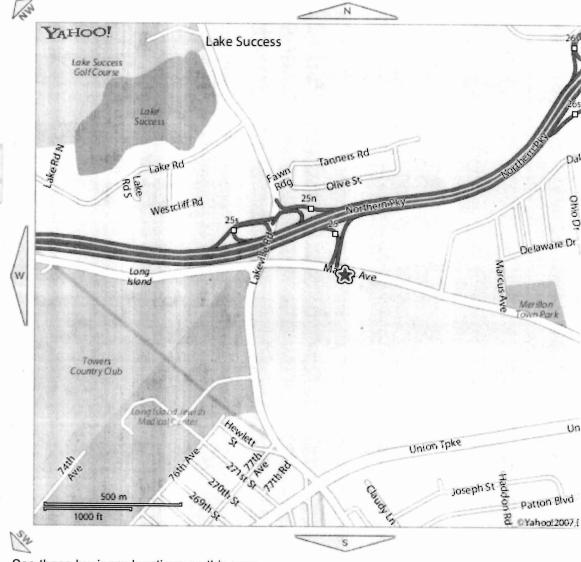
See Locations on this Map

- Food & Dining
- Recreation & Entertainment
- Community Services
- Shopping & Services
- Travel & Transportation
- Financial & ATMs

What's this?

Find more nearby...

Yahoo! Local



See these business locations on this map







Zoom in & Re-Center Re-Center only



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

08/18/97

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER ->

NYR000043521

FACILITY NAME ->

LOCKHEED MARTIN CORP

MAILING ADDRESS ->

2550 N HOLLYWOOD WAY SUITE 301 BURBANK, CA 91505

INSTALLATION ADDRESS ->

UNION TNPK & LAKEVILLE RD NORTH HEMPSTEAD, NY 11040

EFA Form 8700-12AB (4-80)

UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
REGION II
290 BROADWAY
NEW YORK, NEW YORK 10007-1866

ATTN: AIR & WASTE MANAGEMENT DIVISION, 22ND FL.
HAZARDOUS & SOLID WASTE PROGRAMS BRANCH
RCRA NOTIFICATIONS

TO: JENSEN, DAVID

MGR GROUNDWATER

LOCKHEED MARTIN CORP

2550 N HOLLYWOOD WAY SUITE 301

BURBANK, CA 91505



Activity STAUGH AMILES

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VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes	8. Refer to Instructions.) 8. Used Oil Fuel Activities
A. Hazardous Waste Activity 1. Generator (See instructions) 2. Greater than 1000kg/mo (2200 bbs.) 3. Treater, Stoner, Dispose installation) Note: A perifor this activity; see instructions (c. Less than 100 kg/mo (220 lbs.) 2. Transporter (Indicate Mode in boxes 1-5 below) 3. For own waste only 5. For commercial purposes 3. Generator Marketers 6. Boller and/or industr 7. Smelter Defering 9. Small Quantity 1. Air 1. Air 2. Rail 3. Highway 4. Water 4. Water 5. Other - specify 5. Underground injection of	1. Off-Specification Used C8 Fuel a. Generator Marketing to Burner b. Other Marketier b. Other Marketier c. Burner - Indicate devicers: - Type of Combustion Cevice 1. Utility Soller 2. Industrial Boiler 2. Industrial Furnace 3. Industrial Furnace 1. Utility Soller 2. Industrial Furnace 3. Industrial Furnace
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I certify under penalty of law that this document and all attachments we accordance with a system designed to assure that qualified personne submitted. Based on my inquiry of the person or persons who manage the gathering the information, the information submitted is, to the best o complete. I am aware that there are significant penalties for submitting fall imprisonment for knowing violations.	el properly gather and evaluate the information as system, or those persons directly responsible for the my knowledge and belief, true, accurate, and
Name and Official Title (type or parties) Allen Krischker, ES	
Note: Mall completed form to the appropriate EPA Regional or State Office. (Se	e Section III of the bookiet for addresses.)

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August 8, 1997

U.S.E.P.A. Region II 250 Broadway 22nd Floor New York, NY 10007-1866

Subject: Request for New Site EPA ID Number

Mr. Jack Hoyt:

Enclosed is a copy of EPA Form 6700-12. Request that your office assign an EPA ID number for the regulated waste activity at the newly designated Lockheed Martin Corporation site located on the northeast corner at the intersection of Union Turnpike and Lakeville Road in the Town of North Hempstead, New York 11040. When a specific mailing address has been obtained for this site it will be forwarded to your office.

Should you require any additional information, please contact the undersigned at 516-574-2386.

Very truly,

Al Krischker

LMFS Principal Program Representative/Operations

AK/ek

Enclosure

cc: R. Gilbert

D. Jensen

RCRA Notifications, USEPA Region II, Air & Waste Management Division

97 AUG 14 AM 10:53 Heaniaren Masic compliand his form. recured by tem (Section 8010 of the Resource Conservation United States Environmental Protection Ad AND ROCOVEY ACIL 1- (200 s. AL 1. Installation's EPA ID Number (Mark X in the appropriate box) C. Installation's EPA ID Mus B. Subsequent Notification N A First Nouncetion (complete Item C) ... 11. Name of Installation (Include company and specific ate name) I COO RIPIOR INTI K HIE I EID IMIAIRIT III. Location of Installation (Physical address not P.O. Box or Route Number) Street UIN 110 Street (cominued) RI O D ZIP Code State City or Town RI T County Code County Name NIAISISIAI U IV. Installation Mailing Address (See Instructions) (516)574-2386 Street or P.O. Box 3 0 11 SUII HO Ni 2 5 5 0 State ZIP Code ... City or Town 1 5 10 | 5 1 - 1 CIA BI UR BAN V. Installation Contact (Person to be contacted regarding waste activities at site) (first) Name (last) D VII DIA SE ENI N Phone Number (area code and number) Job Title 0 EIR UNDW AIT R | 0 | MIGIRI GI VI. Installation Contact Address (See Instructions) A. Contact Address | B. Street or P.O. Box Mailing Location 31 0 010 5 0 X State City or Town 0 5 URIBIAI B VII. Ownership (See instructions) Children Name A. Name of Installation's Legal Owner OIN 0 RIA IEI D KI H IE L ol C Street, P.O. Box, or Route Number VIE R 0 8 0 6 ZIP Code State City or Town 21018 MID BIE THE SI D A (Date Changed) Year D. Change of Owner B. Land Type | C. Owner Type Day Monte Indicator Phone Number (ares code and number) Yes X No P P 0 1 - | 8 | 9 | 7 | - | 6 | 0 Continue on reverse

EPA Form 6705-12 (Re. 5-52. Previous edition is obsolete.

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	10 - For Official Use Only
VIII. Type of Regulated Waste Activity (Mark 'X' in the appropriate boxes.	Refer to instructions.)
A. Hazardous Waste Activity	B. Used Oil Fuel Activities
1. Generator (See instructions) 2. Greater than 1000kg/mo (220 bbs.) 3. Installation Note A permit for the activity; see instructions for the activity; see instructions or the	a. Generator Marketer a. Generator Marketer b. Other Marketer c. Burner - indicate devicers: - Type of Combustion Cevice 1. Utility Soller 2. Industrial Soller Examption 2. Specification Used Oil Fue: Marketer (or On-site Burner) Who First Cairns the Oil Meets the Specification
IX Description of Regulated Wastes (Use additional sheets if necessary)	Series de la
A. Characteristics of Nonlisted Hazardous Wastes. Mark 'X' in the boxes correspondence wastes your installation handles. (See 40 CFR Parts 261.20 - 261.24) 1. lon-Habte 2 Comosive 3 Reactive Characteristic (D001; (D002) (D000) X	0 0 7 D 0 0 9 D 0 0 8
C. Other Wastes. (State or other wastes requiring a handler to have an I.D. number. 1	See instructions.)
X Certification	
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August 8, 1997

U.S.E.P.A. Region II 250 Broadway 22nd Floor New York, NY 10007-1866

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Very truly,

Al Krischker

LMFS Principal Program

Representative/Operations

AK/ek

Enclosure

CC:

R. Gilbert

D. Jensen

RCRA Notifications, USEPA Region II, Air & Waste Management Division

UNISYS

Miscellaneous Shipping Order/ Interbuilding Manifest

Unisys Corporation 365 Lakeville Road Great Neck, New York 11020-1696

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	aneous Shipping Order ilding Shipping Manifest	No. A15102	2 13. 1997				
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		PLEASE FED	X NEXT	DAY.			

Issuer/Sender Signature Date Title Dept. Tel. M.S. 8/13/97 E5H H2H1 2385 Krischeer Approval
O Code B**
O Other Print Date Signature Title Dept. Tel. M.S. 8/13/97 U2H1 2385 210 ESH Mage. Krischker

**Required on all Miscellaneous Shipping Orders. See OPP 4.64, 4.66.

UC155(1/94)

^{*}In order to ensure compliance with DOT regulations, hazardous material must be sent to the Shipping Dept., M.S. P-11, for packaging.



ACKNOWLEDGEMENT OF NOTIFICATION OF HAZARDOUS WASTE ACTIVITY

04/14/2006

Region 2

This is to acknowledge that you have filed a Notification of Hazardous Waste Activity for the installation located at the address shown in the box below to comply with Section 3010 of the Resource Conservation and Recovery Act (RCRA). Your EPA Identification Number for that installation appears in the box below. The EPA Identification Number must be included on all shipping manifests for transporting hazardous wastes; on all Annual Reports that generators of hazardous waste, and owners and operators of hazardous waste treatment, storage and disposal facilities must file with EPA; on all applications for a Federal Hazardous Waste Permit; and other hazardous waste management reports and documents required under Subtitle C of RCRA.

EPA I.D. NUMBER: NYR000043521

INSTALLATION NAME: | IPARK LAKE SUCCESS LLC

INSTALLATION ADDRESS:

1111 MARCUS AVE

LAKE SUCCESS, NY 11042-1034

MAILING ADDRESS:

1111 MARCUS AVE

LAKE SUCCESS, NY 11042-1034

EPA Form 8700-12AB (4-80)

USEPA - REGION 2 RCRA Programs Branch 290 Broadway, 22nd Floor New York, NY 10007-1866

ATTN: RCRA NOTIFICATIONS

Tel: (212) 637-4106 Fax: (212) 637-3056

TO: IPARK LAKE SUCCESS LLC

or Current Occupant

ATTN: GEORGE MULLEN

1111 MARCUS AVE

LAKE SUCCESS, NY 11042-1034

OMB#: 2050-0028 Expires 1/31/2006

FORM TO: The Appropriate State or EPA Regional Office.	United States Environmental RCRA SUBTITLE C SITE IDEN		TION FORM					
Reason for Submittal (See instructions	Reason for Submittal: To provide Initial Notification of Regulated Was waste, universal waste, or used oil activities)	te Activity (to		lous				
on page 13.) MARK ALL BOX(ES) THAT APPLY	☐ To provide Subsequent Notification of Regulate ☐ As a component of a First RCRA Hazardous W ☐ As a component of a Revised RCRA Hazardou ☐ As a component of the Hazardous Waste Repo	/aste Part A F s Waste Part	Permit Application	-				
2. Site EPA ID Number (page 14)	EPA ID Number NIYRIOIOIOI		5,2,1,					
3. Site Name (page 14)	Name: IPARK LAKE SUCCESS			*				
4. Site Location	Street Address: 1111 MARCUS AV	E.						
Information (page 14)	City, Town, or Village: LAKE SUCCESS		State: NY					
	County Name: NASSAU		Zip Code: 11042 -1034					
5. Site Land Type (page 14)	Site Land Type: 🌹 Private 🗖 County 🗖 Distric	ot □ Federa	I □ Indian □ Municipal □ State 〔	□ Other				
6. North American Industry Classification	A. B.							
System (NAICS) Code(s) for the Site (page 14)	c.							
7. Site Mailing	Street or P. O. Box: 1111 MARCUS AVE	3						
Address (page 15)	City, Town, or Village: LAKE SUCCESS		x					
	State: NEW YORK							
	Country: USA		Zip Code: 11042					
8. Site Contact Person	First Name: GEORGE	MI:	Last Name: MULLEN	-				
(page 15)	Phone Number: 516-616-9500 Extension	n:	Email address:					
9. Operator and Legal Owner of the Site	A. Name of Site's Operator: IPARK LAKE SUCCESS LLC Operator Type: X Private County District	□ Federal	Date Became Operator (mm/dd/yy	2				
(pages 15 and 16)	B. Name of Site's Legal Owner:		Date Became Owner (mm/dd/yyyy					
	IPARK LAKE SUCCESS LLC	: □ Federal	☐ Indian ☐ Municipal ☐ State ☐					
	, VW		•					

EPA ID NO: LL	!!				OMB#:	2050-0028	Expires 1/31/200		
9. Legal Owner	Street or P. O. Box:	11	11 MARCUS AVE				* .		
(Continued) Address	City, Town, or Village:		KE SUCCESS		4 1 ,	273 5	E. 02		
Addiess	State:	NY							
	Country: USA				Zip Code:	11042			
10. Type of Regulated Mark "Yes" or "No"	Waste Activity " for all activities; compl	ete any	y additional boxes a	ıs instructe	d. (See instruc	ctions on pa	ages 17 to 20.)		
A. Hazardous Was Complete all par	te Activities rts for 1 through 6.		14			18			
Y № N □ 1. Generator of Hazardous Waste If "Yes", choose only one of the following - a, b, or c.					Y □ N □ 2. Transporter of Hazardous Waste				
Ī. 3	Greater than 1,000 kg/mo of non-acute hazardous v (TENPORLEY NUNDER	YONO	Y □ N □ 3. Treater, Storer, or Disposer Hazardous Waste (at your sind A hazardous waste permit is retained this activity.						
□ b. SQG:	□ b. SQG: 100 to 1,000 kg/mo (220 - 2,200 lbs./mo.) of non-acute hazardous waste; or					Y □ N □ 4. Recycler of Hazardous Waste (at you			
☐ c, CESQ	G: Less than 100 kg/mo (of non-acute hazardou	YONO	site) Y □ N □ 5. Exempt Boiler and/or Industrial						
In addition, in	ndicate other generator a	ıctivitie	es.	Furnace If "Yes", mark each that applies.					
Y 🗖 N 🗖 d. United	d States Importer of Hazar	dous V	Vaste	a. Small Quantity On-site Burner Exemption					
Y ☐ N ☐ e. Mixed	Waste (hazardous and ra	dioactiv	ve) Generator	b. Smelting, Melting, and Refining Furnace Exemption					
-	,			YONO	6. Undergroun	nd Injection	Control		
B. Universal Waste Activities Y □ N □ 1. Large Quantity Handler of Universal Waste (accumulate					C. Used Oil Activities Mark all boxes that apply.				
	more) [refer to your Stat /hat is regulated]. Indica			YONO1	. Used Oil Tra		applies		
	rat is regulated]. Indica rated and/or accumulated			If "Yes", mark each that applies. ☐ a. Transporter					
	es that apply:				□ b. Transfer	r Facility			
1	Gen	nerate	<u>Accumulate</u>	Y 🗆 N 🗆 2	. Used Oil Pro	cessor and	or Re-refiner		
a. Batteries					If "Yes", mar	k each that			
b. Pesticides					□ a. Process□ b. Re-refin				
c. Thermostats	S				D. Ne-lenn	ei			
d. Lamps			0	Y 🗆 N 🗖 3	. Off-Specifica	ition Used C	Oil Burner		
e. Other (spec	ify)			Y 🗆 N 🗆 4	. Used Oil Fue	l Marketer			
f. Other (spec	ify)		-		If "Yes", mar				
	ify)				Off-Spe Off-Spe	ecification Us ecification Us	sed Oil Burner		
✓ □ N □ 2. Destination i	Facility for Universal Was dous waste permit may be		ed for this activity.		□ b. Markete Used O		Claims the Specifications		

A. Waste Codes for Federally leaded at your site. List ther additional page if more space:	m in the order they are				
D008					
B. Waste Codes for State-Regularizations wastes handled at more spaces are needed for w	your site. List them in				_
				,	
					4-4-4
,		У			
12. Comments (See instructions of	on page 21.)				
n accordance with a system designed on my inquiry of the person or person information submitted is, to the best of penalties for submitting false informat For the RCRA Hazardous Waste Part	d to assure that qualifus who manage the sy of my knowledge and be tion, including the pos	ied personnel prope estem, or those perso belief, true, accurate sibility of fine and in	rly gather and evaluons directly respons a, and complete. I are aprisonment for know	ate the information su lible for gathering the in a ware that there are wing violations.	bmitted. Base nformation, th significant
n accordance with a system designed on my inquiry of the person or person of a nation submitted is, to the best of denalties for submitting false informate for the RCRA Hazardous Waste Part See instructions on page 21.)	d to assure that qualifies who manage the sy of my knowledge and the ion, including the pose that A Permit Application,	ied personnel prope estem, or those person belief, true, accurate sibility of fine and im , all operator(s) and	rly gather and evaluons directly respons a, and complete. I are aprisonment for known owner(s) must sign	ate the information su lible for gathering the in a ware that there are wing violations.	bmitted. Base nformation, th significant
13. Certification. I certify under per n accordance with a system designed on my inquiry of the person or person information submitted is, to the best of penalties for submitting false information for the RCRA Hazardous Waste Part See instructions on page 21.) Signature of operator, owner, or an authorized representative	d to assure that qualifies who manage the sy of my knowledge and be dion, including the pose t A Permit Application, Name and Office	ied personnel properstem, or those personelief, true, accurate sibility of fine and im, all operator(s) and	rly gather and evaluons directly response, and complete. I are apprisonment for knowner(s) must sign int)	ate the information su lible for gathering the in a ware that there are wing violations.	bmitted. Base information, the significant b) and 270.11 Date Signed (mm/dd/yyy)

RCRARep Handler Detail Report

Report run on: March 29, 2006 9:58 AM

Facility Information

Name / ID, Location / Activity Location, GPRA

Dist Notified SNC Regulated Activity

LOCKHEED MARTIN CORPORATION

1 OK LG -----

NYR000043521 1111 MARCUS AVE, LAKE SUCCESS NY

Extract Flag

All data for this Handler is released to the Public (except any enforcement-sensitive CME data)
Activity Location

Handler Module Data for NY State only

Other Site Name

01/01/01 99 Biennial LOCKHEED MARTIN CORP ES&H

02/26/98 97 Biennial LOCKHEED MARTIN CORP

Location Address

05/22/02 01 Biennial 1111 MARCUS AVE

NASSAU (NY059)

LAKE SUCCESS, NY 11042 State District: NYSDEC R1

Land Type: X (X)

01/01/01 99 Biennial 365 LAKEVILLE RD

NASSAU (NY059)

GREAT NECK, NY 110201696 State District: NYSDEC R1

Land Type: U (U)

02/26/98 97 Biennial UNION TURNPIKE & LAKEVILLE RD

NASSAU (NY059)

NORTH HEMPSTEAD, NY 110400000 State District: NYSDEC R1

Land Type: U (U)

08/12/97 Notification UNION TNPK & LAKEVILLE RD

NASSAU (NY059)

NORTH HEMPSTEAD, NY 11040 State District: NYSDEC R1 Land Type: Private (P)

North American Industrial Classification (NAICS)

05/22/02 01 Biennial 56291

56291 Remediation Services

Mailing Address

05/22/02 01 Biennial 88 DURYEA RD

MELVILLE, NY 11747

01/01/01 99 Biennial 100 S CHARLES ST STE 1400

BALTIMORE, MD 212011696

02/26/98 97 Biennial 2550 N HOLLYWOOD WAY 3RD FLOOR

BURBANK, CA 915050000

08/12/97 Notification 2550 N HOLLYWOOD WAY SUITE 301

BURBANK, CA 91505

Contact